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| <b>Issue Classification</b><br> | <b>Application/Control No.</b><br>10715376 | <b>Applicant(s)/Patent Under Reexamination</b><br>SUN ET AL. |
|   | <b>Examiner</b><br>THINH T NGUYEN          | <b>Art Unit</b><br>2818                                      |

| ORIGINAL                  |  |          |     |         |  | INTERNATIONAL CLASSIFICATION |   |   |   |                      |             |  |  |  |  |  |  |  |
|---------------------------|--|----------|-----|---------|--|------------------------------|---|---|---|----------------------|-------------|--|--|--|--|--|--|--|
| CLASS                     |  | SUBCLASS |     |         |  | CLAIMED                      |   |   |   |                      | NON-CLAIMED |  |  |  |  |  |  |  |
| 257                       |  | 295      |     |         |  | H                            | O | I | L | 29 / 76 (2008.01.01) |             |  |  |  |  |  |  |  |
| <b>CROSS REFERENCE(S)</b> |  |          |     |         |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
| <b>CLASS</b>              | <b>SUBCLASS (ONE SUBCLASS PER BLOCK)</b> |          |     |         |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
| 257                       | 295                                      | 421      | 427 | E21.666 |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
| 385                       | 158                                      | 173      | 171 |         |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                           |  |          |     |         |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                           |  |          |     |         |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                           |  |          |     |         |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                           |  |          |     |         |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                           |  |          |     |         |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                           |  |          |     |         |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                           |  |          |     |         |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                           |  |          |     |         |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                           |  |          |     |         |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                           |  |          |     |         |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                           |  |          |     |         |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                           |  |          |     |         |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                           |  |          |     |         |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                           |  |          |     |         |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |

| <input checked="" type="checkbox"/> <b>Claims renumbered in the same order as presented by applicant</b> <input type="checkbox"/> <b>CPA</b> <input checked="" type="checkbox"/> <b>T.D.</b> <input type="checkbox"/> <b>R.1.47</b> |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|---|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|
| Final   | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original |
| 1   | 1        | 17    | 18       | 33    | 40       |       |          |       |          |       |          |       |          |       |          |
| 2   | 2        | 18    | 19       | 34    | 41       |       |          |       |          |       |          |       |          |       |          |
| 3   | 3        | 19    | 20       | 35    | 42       |       |          |       |          |       |          |       |          |       |          |
| 4   | 4        | 20    | 21       | 38    | 43       |       |          |       |          |       |          |       |          |       |          |
| 5   | 5        | 21    | 22       | 37    | 44       |       |          |       |          |       |          |       |          |       |          |
| 6   | 6        | 22    | 23       | 38    | 45       |       |          |       |          |       |          |       |          |       |          |
| 7   | 7        | 23    | 24       |       |          |       |          |       |          |       |          |       |          |       |          |
| 8   | 8        | 24    | 25       |       |          |       |          |       |          |       |          |       |          |       |          |
| 9   | 9        | 25    | 30       |       |          |       |          |       |          |       |          |       |          |       |          |
| 10  | 10       | 26    | 31       |       |          |       |          |       |          |       |          |       |          |       |          |
| 11  | 11       | 27    | 32       |       |          |       |          |       |          |       |          |       |          |       |          |
| 12  | 12       | 28    | 33       |       |          |       |          |       |          |       |          |       |          |       |          |
| 13  | 13       | 29    | 34       |       |          |       |          |       |          |       |          |       |          |       |          |
| 14  | 14       | 30    | 37       |       |          |       |          |       |          |       |          |       |          |       |          |
| 15  | 15       | 31    | 38       |       |          |       |          |       |          |       |          |       |          |       |          |
| 16  | 17       | 32    | 39       |       |          |       |          |       |          |       |          |       |          |       |          |

|  |                   |                                    |                             |
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| NONE   |                   | <b>Total Claims Allowed:</b><br>38 |                             |
| (Assistant Examiner)<br>/THINH T NGUYEN/<br>Primary Examiner Art Unit 2818 | (Date)<br>05/2009 | O.G. Print Claim(s)<br>1           | O.G. Print Figure<br>FIG 2A |
| (Primary Examiner)   | (Date)            |                                    |                             |